PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or	Docket	Number
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09/7755

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		00	OTHER			
TOTAL CLAIMS		46		(Coldini 2)		ı	RATE FEE		OR 1	SMALL RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	· · · · · · · · · · · · · · · · · · ·		BASIC FEE	710.00
_	10. 20.	1. (-		* 26						h (
TOTAL CHARGEABLE CLAIMS 46 minus 20=					*			X\$ 9=		OR	X\$18=	468
INDEPENDENT CLAIMS minus 3 =				>	5		X40=		OR	X80=	400	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTAL		OR	TOTAL	1575	
CLAIMS AS AMENDED - PART II										OTHER		
		(Column 1)	12.00	(Colu		(Column 3)	l r	SMALL		OR •	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT	77	NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	Ó
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN.	CLAIM	Ĺ		+135=			+270=	
							l	TOTAL		OR	TOTAL	er en
		· (O 1 4)		(0.1	۵۱	(0.4	s 1	ADDIT. FEE		OR	ADDIT. FEE	E.O.G.
		(Column 1) CLAIMS		(Colui HIGE		(Column 3)	1 r		ADDI-	1 1		ADDI
AMENDMENT B	4: 4:	REMAINING AFTER AMENDMENT	#.\$	NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	C
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	ENDENT	CLAIM		l	+135=		OR	+270=	
							L	TOTAL			TOTAL	
		(Calumn 4)		(O - I	O\	(0-1	ļ	ADDIT. FEE	,	OR	ADDIT. FEE	
		(Column 1) CLAIMS	938 8888	(Colui HIGH		(Column 3)	l -			1		
AMENDMENT C		REMAINING AFTER AMENDMENT	铁铁	NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	╽┟	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		╽┟					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		ber Previously Pa					r fou	nd in the app	ropriate box	in col	umn 1.	